'Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

| CLAIMS AS FILED - PART I<br>(Column 1)  |   |   |             |                               |              | SMALL E<br>(Column 2) TYPE |          | NTITY               | OR                     | OTHER<br>SMALL |                     |                        |
|---|---|---|-------------|-------------------------------|--------------|----------------------------|----------|---------------------|------------------------|----------------|---------------------|------------------------|
| TOTAL CLAIMS  |   |   |             |                               |              |                            | ſ        | RATE                | FEE                    | 7              | RATE                | FEE                    |
| FOR   |   |   | NUMBER      | FILED                         | NUME         | BER EXTRA                  |          | BASIC FEE           | 355.00                 | OR             | BASIC FEE           | 710.00                 |
| TOTAL CHARGEABLE CLAIMS 1 2 minus 20=   |   |   |             |                               | * 10         |                            |          | X\$ 9=              | 126                    | OR             | X\$18=              |                        |
| INDEPENDENT CLAIMS 4 8 minus 3 =  |   |   |             |                               | * 5          | 4                          |          | X40=                | 200                    | OR             | X80=                |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |   |   |             |                               |              |                            |          | +135=               |                        | OR             | +270=               |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2              |   |   |             |                               |              |                            |          | TOTAL               | 336                    | OR             | TOTAL               |                        |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)                         |   |   |             |                               |              |                            | _        | SMALL               | ENTITY                 | OR             | OTHER<br>SMALL I    |                        |
| AMENDMENT A   | 0   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | act for     | HIGH<br>NUM<br>PREVIO<br>PAJD | BER<br>OUSLY | PRESENT<br>EXTRA           |          | RATE                | ADDI-<br>TIONAL<br>FEE |                | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total   | . 34                                      | Minus       | ** 9                          | 4            | =                          |          | X\$ 9=              |                        | OR             | X\$18=              |                        |
|   | Independent   | NTATION OF MU                             | Minus       | *** (                         | CLAIM        | =/                         |          | X40=                |                        | OR             | X80=                |                        |
|   | FINOT PRESE   | INTATION OF INC                           | DETIFIE DEF | CIADEIA                       | CLATIVI      |                            | 1        | +135=               |                        | OR             | +270=               |                        |
|   |   |   |             |                               |              |                            | L<br>4   | TOTAL<br>ADDIT, FEE |                        | OR             | TOTAL<br>ADDIT. FEE |                        |
|   |   | (Column 1)                                |             | (Colui                        |              | (Column 3)                 |          |                     |                        |                |                     |                        |
| AMENDMENT B   | B   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | aş . 4      | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA           |          | RATE                | ADDI-<br>TIONAL<br>FEE |                | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total   | . 165                                     | Minus       | ** 2                          | <del>/</del> | = 13                       |          | X\$ 9=              | 1,179                  | OR             | X\$18=              |                        |
|   | Independent   | NTATION OF MU                             | Minus       | ***                           | CLAIM        | = 34                       | f ig     | X40=                | 1,512                  | OR             | X80=                |                        |
|   | 711107771202  | TTATION OF WIC                            | Jenn Le Der | LIVELIVI                      | OL/ (IIV)    | Legeral 1                  | 1        | +135=               |                        | OR             | +270=               |                        |
|   |   |   |             |                               |              |                            | A        | TOTAL<br>ADDIT. FEE | 2,691                  | OR             | TOTAL<br>ADDIT. FEE |                        |
| (Column 1) (Column 2) (Column 3)  |   |   |             |                               |              |                            |          |                     |                        |                |                     |                        |
| AMENDMENT C   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |             | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA           |          | RATE                | ADDI-<br>TIONAL<br>FEE |                | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total   | *   | Minus       | **                            |              | =                          |          | X\$ 9=              |                        | OR             | X\$18=              |                        |
|   | Independent   | *   | Minus       | ***                           |              | =                          | <b>]</b> | X40=                | <del>,</del>           |                | X80=                |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |             |                               |              |                            |          |                     |                        | OR             |                     |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |   |             |                               |              |                            |          |                     |                        | OR             | +270=               |                        |
| **  | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  TOTAL ADDIT. FEE  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |   |             |                               |              |                            |          |                     |                        |                |                     |                        |